

### REDACTED - FOR PUBLIC INSPECTION

7852 Walker Drive, Suite 200 Greenbelt, Maryland 20770 phone: 301-459-7590, fax: 301-577-5575 internet: www.jsitel.com, e-mail: jsi @jsitel.com

October 11, 2013

### **By Hand Delivery**

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12<sup>th</sup> Street, SW Washington, DC 20554

Re: WC Docket No. 10-90, WC Docket No. 11-42

2013 ETC Annual Report of New Hope Telephone Cooperative

Study Area Code 250308

Dear Ms. Dortch:

On behalf of New Hope Telephone Cooperative "New Hope", JSI files the attached confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission's rules.<sup>1</sup> New Hope seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information.<sup>2</sup> The redacted version is also being filed this date via the FCC's Electronic Comment Filing System.

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall JSI Vice President

301-459-7590

jkuykendall@jsitel.com

cc: Charles Tyler, Telecommunications Access Policy Division (two copies, confidential)

<sup>&</sup>lt;sup>1</sup> 47 C.F.R. §§ 54.313, 54.422.

<sup>&</sup>lt;sup>2</sup> Connect America Fund et al., WC Docket No. 10-90 et al., Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order). 47 C.F.R. § 54.313(f)(2).

	m 481 - Carrier Annual Reporting Illection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	250308	
<015>	Study Area Name	NEW HOPE TEL COOP	
<020>	Program Year	2014	
<030>	Contact Name: Person USAC should contact with questions about this data	Tammy Weeks	
<035>	Contact Telephone Number: Number of the person identified in data line <03	<sup>256-723-2050</sup>	
<039>	Contact Email Address: Email of the person identified in data line <030>	tammyw@nehp.net	
ANNUA	L REPORTING FOR ALL CARRIERS		54.313 54.422 Completion Completion Required Required
<100>	Service Quality Improvement Reporting	(complete attached wo	(check box when complete)
<200> <210>	Outage Reporting (voice) < check box	(complete attached wo	rksheet)
<310>	Unfulfilled Service Requests (voice)  Detail on Attempts (voice)  Unfulfilled Service Requests (broadband)  Detail on Attempts (broadband)	0 (attach descriptive da	
<400> <410> <420> <430> <440> <450>	Number of Complaints per 1,000 customers (void Fixed Mobile Number of Complaints per 1,000 customers (brought Fixed Mobile		
<510> <600> <610> <700> <710> <800> <100> <1010> <1110> <1110>	Service Quality Standards & Consumer Protectio  250308a1510  Functionality in Emergency Situations  250308a1610  Company Price Offerings (voice)  Company Price Offerings (broadband)  Operating Companies and Affiliates  Tribal Land Offerings (Y/N)?  Voice Services Rate Comparability  Terrestrial Backhaul (Y/N)?  Terms and Condition for Lifeline Customers	n Rules Compliance  (check to indicate cert. (attached descriptive da (check to indicate cert. (attached descriptive da (complete attached wa (complete attached wa (if yes, complete attached wa (check to indicate cert. (attach descriptive da (if not, check to indicate cert. (complete attached wa	cument)  v v fication)  cument)  v v v v v v v v v v v v v v v v v v
<2000> <2005>	Price Cap Carriers, Proceed to Price Cap Addition Including Rate-of-Return Carriers affiliated with I	Price Cap Local Exchange Carriers (check to indicate certi (complete attached wo	rksheet)
<3005>		(complete attached wo	

	ervice Quality Improvement Reporting Ollection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code 250308	
<015>	Study Area Name New Hos	IL COOP
<020>	Program Year 2014	
<030>	Contact Name - Person USAC should contact regarding this data	y Weeks
<035>	Contact Telephone Number - Number of person identified in data line <0302	6-723-2050
<039>	Contact Email Address - Email Address of person identified in data line <030	
<110>	Has your company received its ETC certification from the FCC?	(yes / no )
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no ) O
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If you CETC which only receives frozen support, your progress report is only required to address voice telephony service.	mpany is a
	Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	Name of Attached Document (.pdf)
<113>	Maps detailing progress towards meeting plan targets	
<114>	Report how much universal service (USF) support was received	
<115>	How (USF) was used to improve service quality	
<116>	How (USF)was used to improve service coverage	
<117>	How (USF) was used to improve service capacity	
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	250308			
<015>	Study Area Name	NEW HOPE TEL COOP			
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Tammy Weeks			
<035>	Contact Telephone Number - Number of person identified in data line <	<b>030&gt;</b> 256-723-2050			
<039>	Contact Email Address - Email Address of person identified in data line <030> tammyw@nehp.net				

<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS									Did This Outage		
	Reference	<b>Outage Start</b>	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		1
	Number	Date	Time	Date	Time	<b>Customers Affected</b>	<b>Total Number of</b>	Affected	Description (Check	Study Areas	Service Outage	Preventative
							Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
								ما ما				1
							<del>See attache</del>	<del>u</del>				
						WC	rksheet					
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(700) Price Offerings including Voice Rate Data	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	250308
<015>	Study Area Name	NEW HOPE TEL COOP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tammy Weeks
<035>	Contact Telephone Number - Number of person identified in data line <030>	256-723-2050
<039>	Contact Email Address - Email Address of person identified in data line <030>	tammyw@nehp.net

	_	
<701>	Residential Local Service Charge Effective Date	1/1/2013
<702>	Single State-wide Residential Local Service Charge	

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
					See att	ached worksheet			

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	250308
<015>	Study Area Name	NEW HOPE TEL COOP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tammy Weeks
<035>	Contact Telephone Number - Number of person identified in data line <03	0> 256-723-2050
<039>	Contact Email Address - Email Address of person identified in data line <03	30> tammyw@nehp.net

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }
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-			Se	e attached					
			work	sheet					
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(800) Op	00) Operating Companies FCC Form 481				
Data Coll	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
<010>	Study Area Code	250308			
<015>	Study Area Name	NEW HOPE TEL COOP			
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Tammy Weeks			
<035>	Contact Telephone Number - Number of person identified in data line <0	30> 256-723-2050			
<039>	Contact Email Address - Email Address of person identified in data line <0	030> tammyw@nehp.net			
<810>	Reporting Carrier New Hope Telephone Cooperative, Inc.				
<811>	Holding Company				
<812>	Operating Company				

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
:			
•			
•	See a	ttached works	heet
•			
•			
•			
•			
•			
•			

	bal Lands Reporting lection Form	FCC Form 481 OMB Control No. 3060-0986/0	OMB Control No. 3060-0819
		July 2013	
<010>	Study Area Code	250308	
<015>	Study Area Name	NEW HOPE TEL COOP	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Tammy Weeks	
<035>	Contact Telephone Number - Number of person identified in data line	2030> 256-723-2050	
<039>	Contact Email Address - Email Address of person identified in data line		
<910>	Tribal Land(s) on which ETC Serves		
	,		
<920>	Tribal Government Engagement Obligation		
		Name of Attached Document (.pdf)	
	If your company serves Tribal lands, please select (Yes,No, NA) for		
	each these boxes to confirm the status described on the attached		
	PDF, on line 920, demonstrates coordination with the Tribal		
	government pursuant to § 54.313(a)(9) includes:		
		Select	
		(Yes,No,	
		NA)	
<921>	Needs assessment and deployment planning with a focus on Tribal		
	community anchor institutions;		
<922>	Feasibility and sustainability planning;		
<923>	Marketing services in a culturally sensitive manner;		
<924>	Compliance with Rights of way processes		
<925>	Compliance with Land Use permitting requirements		
<926>	Compliance with Facilities Siting rules		
	Compliance with Environmental Review processes		
<927>	and the second and a second and	<u> </u>	
<927>	Compliance with Cultural Preservation review processes		

	o Terrestrial Backhaul Reporting ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 306 July 2013	
<010>	Study Area Code	250308	
<015>	Study Area Name	NEW HOPE TEL COOP	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Tammy Weeks	
<035>	Contact Telephone Number - Number of person identified in data line <030>	256-723-2050	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tammyw@nehp.net	
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)		
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)		

(1200) Te	1200) Terms and Condition for Lifeline Customers FCC Form 481					
Lifeline				OMB Control No. 3060-0986/OMB Control No. 3060-0819		
Data Coll	ection Form			July 2013		
<010>	Study Area Code	2	250308			
<015>	Study Area Name	1	NEW HOPE TEL COOP			
<020>	Program Year	-	2014			
<030>	Contact Name - Person USAC should contact regarding this data		Tammy Weeks			
<035>	Contact Telephone Number - Number of person identified in data I	ine <030>	256-723-2050			
<039>	Contact Email Address - Email Address of person identified in data	line <030>	tammyw@nehp.net			
<1210> <1220>	Terms & Conditions of Voice Telephony Lifeline Plans	h	nme of attached document (.pdf)	es/phone/lifeline-assistance/		
<1220>	Link to Public Website	HTTP	eep-//mee.eeop/produces and service	sy prone, itteline absilicance,		
	"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:					
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	<b>V</b>				
<1222>	Details on the number of minutes provided as part of the plan,	V				
<1223>	Additional charges for toll calls, and rates for each such plan.	V				

(2000) D	rice Cap Carrier Additional Documentation		
	·		FCC Form 481
	lection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819	
Including	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		July 2013
<010>	Study Area Code	50308	
<015>	,	EW HOPE TEL COOP	
<020>	Program Year 2	014	
<030>	Contact Name - Person USAC should contact regarding this data	ammy Weeks	
<035>	Contact Telephone Number - Number of person identified in data line <030>	256-723-2050	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tammyw@nehp.net	
CHECK		the Physics and the could be found as a second likely found as a second	and the second of the second for the
CHECK ti	he boxes below to note compliance as a recipient of Incremental Connect Ame	rica Phase I support, frozen High Cost support, High Cost support to offset a (e) the information reported on this form and in the documents attached be	
	support as set forth in 47 CFR 9 54.515(b),(c),(d),	(e) the information reported on this form and in the documents attached be	elow is accurate.
	Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))		
<2010>	3rd Year Certification (47 CFR § 54.313(b)(2))		<del>                                     </del>
<b>\2011&gt;</b>	310 Teal Certification (47 CFN § 34.313(b)(2))		
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))		
<2012>	2013 Frozen Support Certification		
<2013>	2014 Frozen Support Certification		
<2014>	2015 Frozen Support Certification		
<2015>	2016 and future Frozen Support Certification		
	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}		
<2016>	Certification Support Used to Build Broadband		
	''		
	Connect America Phase II Reporting {47 CFR § 54.313(e)}		
<2017>	3rd year Broadband Service Certification		
<2018>	5th year Broadband Service Certification		
<2019>	Interim Progress Certification		
<2020>	Please check the box to confirm that the attached PDF , on line 2021,		
	contains the required information pursuant to § 54.313 (e)(3)(ii), as a	recipient	
	of CAF Phase II support shall provide the number, names, and address	ses of	
	community anchor institutions to which began providing access to bro	padband	
	service in the preceding calendar year.		
<2021>	Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information	
	- · · · · · · · · · · · · · · · · · · ·		

-	ate Of Return Carrier Additional Documentation lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
- <010>	Study Area Code 250308		
<015>		TEL COOP	
<020>	Program Year 2014		
<030>	0 0	nmy Weeks	
<035> <039>	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	256-723-2050 tammyw@nehp.net	
		tummy western state	
CHECK t	the boxes below to note compliance on its five year service quality plan (pursu CFR § 54.313(f)(2). I further certify that	ant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring the information reported on this form and in the documents attac	
	Progress Report on 5 Year Plan		
(3010)	Milestone Certification {47 CFR § $54.313(f)(1)(i)$ } Please check this box to confirm that the attached PDF , on line $3012$ ,	Name of Attached Document Listing Required Information	
(3011)	contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.		
(3012) (3013) (3014)	Community Anchor Institutions {47 CFR § 54.313{f}(1)(ii)} Is your company a Privately Held ROR Carrier {47 CFR § 54.313{f}(2)} If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313{f}(2) compliance requires:	Name of Attached Document Listing Required Information	(Yes/No)
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(3017) (3018)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation If the response is no on line 3014, Is your company audited?	Name of Attached Document Listing Required Information	250308a13017 (Yes/No)
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains		
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications		
(3020)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.		
(3022)	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,  Underlying information subjected to a review by an independent certified		
(3023)	public accountant		브
(3024)	Underlying information subjected to an officer certification.		
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

	tion - Reporting Carri lection Form	er	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	250308	
<015>	Study Area Name	NEW HOPE TEL COOP	
<020>	Program Year	2014	
<030>	Contact Name - Perso	on USAC should contact regarding this data Tammy Weeks	
<035>	<035> Contact Telephone Number - Number of person identified in data line <030> 256-723-2050		
<039>	<039> Contact Email Address - Email Address of person identified in data line <030> tammyw@nehp.net		

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to	the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
ertify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support cipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.		
Name of Reporting Carrier:		
Signature of Authorized Officer:	Date	
Printed name of Authorized Officer:		
Fitle or position of Authorized Officer:		
Telephone number of Authorized Officer:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	
Persons willfully making false statements on this form ca	n be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	250308	
<015>	Study Area Name	NEW HOPE TEL COOP	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC s	nould contact regarding this data Tammy Weeks	
<035>	Contact Telephone Number - N	umber of person identified in data line <030> 256-723-2050	
<039>	Contact Email Address - Email A	address of person identified in data line <030> tammyw@nehp.net	

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

certify that (Name of Agent) Tohn Staurulakis, Inc is authorized to submit the information reported on behalf of the reporting carrier. I lso certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized gent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.				
Name of Authorized Agent: John Staurulakis, Inc				
Name of Reporting Carrier: NEW HOPE TEL COOP				
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 10/11/2013			
Printed name of Authorized Officer: James Cook				
Title or position of Authorized Officer: General Manager				
Telephone number of Authorized Officer: 256-723-8800				

## TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier			
, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.			
Name of Reporting Carrier: NEW HOPE TEL COOP			
Name of Authorized Agent or Employee of Agent: John Staurulakis, Inc.			
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	10/11/2013	
Printed name of Authorized Agent or Employee of Agent: Lans Chase			
Title or position of Authorized Agent or Employee of Agent Staff Director - Regulatory Affairs			
Telephone number of Authorized Agent or Employee of Agent: 770-569-2105			
Study Area Code of Reporting Carrier: 250308 Filing Due Date for this form:	10/15/2013		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Commun 18 of the United States Code, 18 U.S.C	, , , , ,	fine or imprisonment under Title	

Attachments

# **New Hope Telephone Cooperative, Inc.**

# Demonstration of Complying With Applicable Service Quality Standards and Consumer Protection Rules

In establishing this certification in its 2005 ETC Order,<sup>1</sup> the FCC found that an ETC must make "a specific commitment to objective measures to protect consumers." The FCC found that for wireless ETCs, compliance with CTIA's Consumer Code for Wireless Service would satisfy this requirement" and that the sufficiency of other commitments would be considered on a case-by-case basis.<sup>3</sup> In this context, the FCC stated, "to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement."

New Hope Telephone Cooperative, Inc. ("Company") hereby certifies that it is complying with applicable service quality standards and consumer protection rules. The Company is subject to consumer protection obligations under state law. These obligations include, but are not limited to, the following: (1) filing a Local Exchange Tariff pursuant to the requirements of the Alabama Public Service Commission's Rules and Regulations, Telephone Rules, Rule T-12, Filing of Telephone Tariffs and The Code of Alabama 1975 Section 37-1-81, which disclose rates, terms and conditions of service to customers; (2) adherence to state consumer protection requirements governing telephone providers which require adherence to minimum service standards as

<sup>&</sup>lt;sup>1</sup> Federal-State Joint Board on Universal Service, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) ("2005 ETC Order").

<sup>&</sup>lt;sup>2</sup> *Id.* at para. 28.

<sup>&</sup>lt;sup>3</sup> *Id.* The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: "(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy." *Id.* at n. 71.

<sup>&</sup>lt;sup>4</sup> *Id.* at n. 72.

Attachment - Line 510

identified in the Alabama Public Service Commission's Rules and Regulations, Telephone Rules, Rule T-21, protection against cramming and other deceptive practices as identified in Rule T-16(C)(11); (3) truth-in-billing requirements as identified in Rule T-16; and (4) CPNI, Red Flag Rules and other applicable federal and state requirements governing the protection of customers' privacy.

The Company offers the following as examples of how it meets the service quality and consumer protection requirements. Company maintains and updates appropriate tariffs with all rates, terms and conditions on file with the Alabama Public Service Commission and maintains a copy of such tariff for public inspection at Company offices. Company also sends all required bill messages and/or customer notifications, including but not limited to, do-not call list, cramming, truth-in billing, Low Income Support/Lifeline, etc. Company also maintains a CPNI Manual and Red Flag Manual. Company also provides and trouble reports to the Alabama Public Service Commission.

# New Hope Telephone Cooperative, Inc. Ability to Function in Emergency Situations

New Hope Telephone Cooperative, Inc. hereby certifies that it is able to function in emergency situations as set forth in the Code of Federal Regulations, Title 47, Part 54, Subpart C, §54.202(a)(2)<sup>1</sup> and the Alabama Public Service Commission Rules and Regulations, Telephone Rules. The Company's network is designed to remain functional in emergency situations without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a)(2). The Company can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will also allow the Company to manage traffic spikes throughout its network, as emergency situations require.

Specifically, each central office building is supplied with standby generators and battery back-up that enable the central office to keep running until power is restored so long as fuel is available, or until system changes are made to reroute traffic. The Company's central office(s) that have twenty-four (24) hour maintenance coverage or have an automatic start engine alternator can provide a minimum of three (3) hours of batter reserve in accordance with the Alabama Public Service Commission Rules and Regulations, Telephone Rules, Rule T-21(L)(2). All other central office(s), as and if applicable, have a minimum of eight (8) hours of battery reserve In accordance with Rule T-21(L)(2).

Section 54.202(a)(2) requires ETCs that are designated by the Commission to "demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations."

# **REDACTED - FOR PUBLIC INSPECTION**

# **NEW HOPE TELEPHONE COOPERATIVE (SAC 250308)**

 $\textbf{ATTACHMENT-LINE}\,3017$ 

# ATTACHMENT REDACTED IN ENTIRETY